Return Address:		

## DECLARATION OF SERVICE CONNECTION FOR GROUP B WATER SYSTEM

(NOTE: A COPY OF THIS INSTRUMENT IS TO BE FILED ON EACH PARCEL NUMBER LISTED AS HAVING A CONNECTION TO THIS SYSTEM)

NAME OF WATER SYSTEM:				
ID NUMBER OF WATER SYSTEM:ADRRESS OF WELL:				
	s), assign(s) or heir(s), this notice lows have a legal connection to the	is to alert you that the following parcel numbers his water supply.		
including all allowed connect water system operators under	ions, operating cost assessments,	itions under which this water system operates, management structure, and responsibilities of the inty law, is recorded with King County Records		
Any person interested in obta County Department of Public		g this water system may contact the Seattle-King		
The initial owner/developer o Name	f this water system is:			
Address				
City	State	Zip		
The designer of this water sys	tem is:			
Address				
City	State	Zip		
I will furnish a copy of this in recorded.	formation sheet to the Seattle-Kir	ng County Department of Public Health after it is		
	(Owner/developer)			
STATE OF WASHINGTON	)			
COUNTY OF KING	) ss )			
I, the undersigned, a Notary I that, on this day of	Public in and for the County of Ki	ing in the State of Washington, do hereby certify, personally appeared before me		
		to me known to be the		
Individual(s)	described herein what and sealed the same as his/her/th	no executed the foregoing instrument, and neir free and voluntary act and deed, for the uses		
GIVEN under my hand and o	fficial seal the day and year last at	pove written.		
		Notary Public in and for the State of Washington, Residing at)		